FORM D

SECURITIES AND EXCHANGE COMPANY Processing OMB Number:
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FORM D

SEP 29 2008

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION PO SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix Serial					
DATE RECEIVED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.) The Landist Fund, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	PROCESSED
A. BASIC IDENTIFICATION DATA	OCT 072008
1. Enter the information requested about the issuer	- OLL DELITEDS
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON REUTERS
The Landist Fund, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
716 Churchill Drive, Chapel Hill, NC 27517	(919) 338-8038
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Private investment partnership	Hill Hill (III Her till the market
Type of Business Organization corporation limited partnership, already formed other (p	please sp
business trust limited partnership, to be formed	08060361
Actual or Estimated Date of Incorporation or Organization: O5 O8 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated : DE
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only reportereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

		A. BASIC IDE	NTIFICATION DATA						
2. Enter the information req	uested for the fol	lowing:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;									
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.									
			corporate general and man						
		f partnership issuers.			·				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if Landist Capital Manageme									
Business or Residence Address 716 Churchill Drive, Chape	•		de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if Andy Louis-Charles	individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)						
716 Churchill Drive, Chape	1 Hill, NC 27517	7							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)			· · · · · · · · · · · · · · · · · · ·					
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)		10 B 10 P 1				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)	<u>.</u>	12.44				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)						
	(Use blank sheet, or copy and use additional copies of this sheet, as necessary)								

	B. INFORMATION ABOUT OFFERING												
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes ⋉	No □			
	Answer also in Appendix, Column 2, if filing under ULOE.									ы			
2.										\$	0,000.00		
3.	Does th	e offering	permit ioin	t ownershi	p of a sing	le unit?						Yes	No
4.	Enter th	ne informat	ion request	ed for eac	h person v	vho has bee	n or will t	e paid or	given, dire	ctly or ind	irectly, any		
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, ar commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offerin If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a sta												
	or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	l Name (first, if ind								_		
N/		Dacidanca	Address (N	lumber and	1 Street C	ity State 7	'in Code\				<u></u>		
Ьu	siliess of	Kesidelice	Audiess (N	iumoer and	i street, C	ity, State, z	np code)						
Na	me of As	sociated Br	oker or De	aler		•							
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	· · · -					
	(Check	"All States	" or check	individual	States)						***************************************	All States	
	AL	AK	AZ	AR	CA	CO	CT)	DE	DC	FL	GA	Н	ID
	IL	[N	IA NV	KS	KY	LA	ME	MD	MA	MI OH	MN	MS	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY) VT	NC VA	ND WA	WV	OK WI	OR WY	PR
Ful	Il Name (Last name	first, if ind	ividual)							<u> </u>		
Bu	siness or	Residence	Address (1	Number an	d Street. C	City, State,	Zip Code)						
_							· · · · · · · · · · · · · · · · · · ·	 					
Na	me of As	sociated Br	oker or De	aler									
Sta			Listed Has									·	
	(Check	"All States	" or check	individual	States)			***************************************				☐ Al	I States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	MT	IN NE	NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if indi	ividual)		<u></u>							
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check "All States" or check individual States)								□ VI	1 States			
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID)
	IL MT	IN NE	IÄ NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	$\overline{\nabla T}$	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	3	\$
	Equity	S	s
	Common Preferred		
	Convertible Securities (including warrants)	0.00	\$
	Partnership Interests		\$ 72,940.28
	Other (Specify)		\$ 0.00
	Total	100,000,000.0	\$ 72,940.28
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	A March To		\$ 50,000.00
	Accredited Investors		\$ 22,940.28
	Non-accredited Investors	_	<u> </u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	-	•
	Regulation A		\$
	Rule 504		\$
	_		\$ \$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-	\$_0.00
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	_	\$
	Total		s 0.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	. .			
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."			\$			
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross					
			Payments to				
			Officers, Directors, & Affiliates	Payments to Others			
	Salaries and fees	[\$_0.00	\$_0.00			
	Purchase of real estate	[\$_0.00	\$_0.00			
	Purchase, rental or leasing and installation of mac and equipment	hinery [\$ 0.00	\$			
	Construction or leasing of plant buildings and fac-	ilities[] \$ <u></u>	s 0.00			
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	ղ \$ 0.00	□\$ ^{0.00}			
	Repayment of indebtedness		\$ 0.00	\$ 0.00			
	Working capital		_	s0.00			
	Other (specify): Estimated Management Fee, w	which is based on a percentage of the assets	/ \$ 1,458.81	\$ 71,481.47			
	(2% annually); Performance Fee may also be charged but is not included in estimate because						
	of contingent nature of fee. Investment Capital.		. 🗆 \$				
	Column Totals	[\$_1,458.81	\$ 71,481.47			
	Total Payments Listed (column totals added)	\$ <u></u> 7:	2,940.28				
Γ		D. FEDERAL SIGNATURE					
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Commis	sion, upon writte	tle 505, the following on request of its staff,			
Iss	uer (Print or Type)	Signature	Date				
Th	e Landist Fund, L.P.	/////	September 22, 2	2008			

- ATTENTION -

Signer (Print or Type)

Administrator for The Landist Fund, L.P.

Name of Signer (Print or Type)

Nadya Marinin